

Debtor Name Heart 2 Heart Volunteers Inc d/b/a Serenity Hills Life Center
 United States Bankruptcy Court for the: Northern District of West Virginia
 Case number (If known): 5:25-bk-00087

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule _____
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 03/27/2025
 MM / DD / YYYY

 /s/ Sharon Travis

Signature of individual signing on behalf of debtor

Sharon Travis

Printed name

President

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name Heart 2 Heart Volunteers Inc d/b/a Serenity Hills Life Center

United States Bankruptcy Court for the: Northern District of West Virginia (State)

Case number (if known): 5:25-bk-00087

☐ Check if this is an amended filing

Official Form 206Sum**Summary of Assets and Liabilities for Non-Individuals**

12/15

Part 1: Summary of Assets**1. Schedule A/B: Assets—Real and Personal Property** (Official Form 206A/B)**1a. Real property:**Copy line 88 from *Schedule A/B*\$ 5,000,000.00**1b. Total personal property:**Copy line 91A from *Schedule A/B*\$ 175,718.16**1c. Total of all property:**Copy line 92 from *Schedule A/B*\$ 5,175,718.16**Part 2: Summary of Liabilities****2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*\$ 3,846,647.78**3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)**3a. Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 6a of *Schedule E/F*\$ 0.00**3b. Total amount of claims of nonpriority amount of unsecured claims:**Copy the total of the amount of claims from Part 2 from line 6b of *Schedule E/F*+\$ 278,226.41**4. Total liabilities**

Lines 2 + 3a + 3b

\$ 4,124,874.19

Debtor name Heart 2 Heart Volunteers Inc d/b/a Serenity Hills Life CenterUnited States Bankruptcy Court for the: Northern District of West VirginiaCase number (if known): 5:25-bk-00087☐ Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets — Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- ☐ No. Go to Part 2.
- ☒ Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

2. Cash on hand

\$ 0.00

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	
3.1. <u>United Bank</u>	<u>Checking</u>	<u>5 9 0 0</u>	\$ 31,993.86
3.2. <u>See continuation sheet</u>			\$ 152.70

4. Other cash equivalents (Identify all)

4.1. _____ \$ _____

4.2. _____ \$ _____

5. Total of Part 1

\$ 32,146.56

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

Part 2: Deposits and prepayments

6. Does the debtor have any deposits or prepayments?

- ☒ No. Go to Part 3.
- ☐ Yes. Fill in the information below.

Current value of debtor's interest

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit	
7.1. _____	\$ _____
7.2. _____	\$ _____

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment

8.1. _____ \$ _____

8.2. _____ \$ _____

9. Total of Part 2.

Add lines 7 through 8. Copy the total to line 81.

\$ _____

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

- ☐ No. Go to Part 4.
☒ Yes. Fill in the information below.

Current value of debtor's interest

11. Accounts receivable

11a. 90 days old or less: 94,121.60 - 0.00 = → \$ 94,121.60
 face amount doubtful or uncollectible accounts

11b. Over 90 days old: 0.00 - 0.00 = → \$ 0.00
 face amount doubtful or uncollectible accounts

12. Total of Part 3

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$ 94,121.60

Part 4: Investments

13. Does the debtor own any investments?

- ☒ No. Go to Part 5.
☐ Yes. Fill in the information below.

Valuation method used for current value

Current value of debtor's interest

14. Mutual funds or publicly traded stocks not included in Part 1

Name of fund or stock:

14.1. _____ \$ _____

14.2. _____ \$ _____

15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture

Name of entity: _____ % of ownership: _____

15.1. _____ % _____ \$ _____

15.2. _____ % _____ \$ _____

16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1

Describe:

16.1. _____ \$ _____

16.2. _____ \$ _____

17. Total of Part 4

Add lines 14 through 16. Copy the total to line 83.

\$ _____

Part 5: Inventory, excluding agriculture assets**18. Does the debtor own any inventory (excluding agriculture assets)?**

- ☒ No. Go to Part 6.
- ☐ Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19. Raw materials				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____
20. Work in progress				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____
21. Finished goods, including goods held for resale				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____
22. Other inventory or supplies				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____
23. Total of Part 5				\$ _____
Add lines 19 through 22. Copy the total to line 84.				

24. Is any of the property listed in Part 5 perishable?

- ☐ No
- ☐ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- ☐ No
- ☐ Yes. Book value _____ Valuation method _____ Current value _____

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- ☐ No
- ☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

- ☒ No. Go to Part 7.
- ☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
28. Crops—either planted or harvested			
_____	\$ _____	_____	\$ _____
29. Farm animals <i>Examples:</i> Livestock, poultry, farm-raised fish			
_____	\$ _____	_____	\$ _____
30. Farm machinery and equipment (Other than titled motor vehicles)			
_____	\$ _____	_____	\$ _____
31. Farm and fishing supplies, chemicals, and feed			
_____	\$ _____	_____	\$ _____
32. Other farming and fishing-related property not already listed in Part 6			
_____	\$ _____	_____	\$ _____

\$_____

34. Is the debtor a member of an agricultural cooperative?

☐ No

☐ Yes. Is any of the debtor's property stored at the cooperative?

☐ No☐ Yes

☐ No

☐ Yes. Book value \$_____ Valuation method _____ Current value \$_____

☐ No☐ Yes☐ No☐ Yes

Part 7: Office furniture, fixtures, and equipment; and collectibles

☐ No. Go to Part 8.

☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture Assorted Office Equipment			
	\$ _____	_____	\$ 20,000.00 _____
40. Office fixtures			
	\$ _____	_____	\$ _____ _____
41. Office equipment, including all computer equipment and communication systems equipment and software See continuation sheet			
	\$ 0.00 _____	_____	\$ 7,800.00 _____
42. Collectibles <i>Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles</i>			
42.1 _____	\$ _____	_____	\$ _____ _____
42.2 _____	\$ _____	_____	\$ _____ _____
42.3 _____	\$ _____	_____	\$ _____ _____

\$ 27,800.00

44. Is a depreciation schedule available for any of the property listed in Part 7?

☒ No☐ Yes☒ No☐ Yes

Part 8: Machinery, equipment, and vehicles**46. Does the debtor own or lease any machinery, equipment, or vehicles?**

- ☐ No. Go to Part 9.
- ☒ Yes. Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
47.1 _____	\$ _____	_____	\$ _____
47.2 _____	\$ _____	_____	\$ _____
47.3 _____	\$ _____	_____	\$ _____
47.4 _____	\$ _____	_____	\$ _____
48. Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels			
48.1 _____	\$ _____	_____	\$ _____
48.2 _____	\$ _____	_____	\$ _____
49. Aircraft and accessories			
49.1 _____	\$ _____	_____	\$ _____
49.2 _____	\$ _____	_____	\$ _____
50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment) See continuation sheet			
	\$ 0.00	_____	\$ 21,650.00
51. Total of Part 8. Add lines 47 through 50. Copy the total to line 87.			\$ 21,650.00

52. Is a depreciation schedule available for any of the property listed in Part 8?

- ☒ No
- ☐ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- ☒ No
- ☐ Yes

Part 9: Real property**54. Does the debtor own or lease any real property?**

- ☐ No. Go to Part 10.
- ☒ Yes. Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1 667 Stone Shannon Road, Wheeling, WV 26003		\$ _____	_____	\$ 5,000,000.00
55.2		\$ _____	_____	\$ _____
55.3		\$ _____	_____	\$ _____
56. Total of Part 9. Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.				\$ 5,000,000.00
57. Is a depreciation schedule available for any of the property listed in Part 9?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				
58. Has any of the property listed in Part 9 been appraised by a professional within the last year?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

Part 10: Intangibles and intellectual property**59. Does the debtor have any interests in intangibles or intellectual property?**

- ☐ No. Go to Part 11.
- ☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets	\$ _____	_____	\$ _____
61. Internet domain names and websites www.serenityhillslifecenter.org	\$ _____	_____	\$ Unknown
62. Licenses, franchises, and royalties	\$ _____	_____	\$ _____
63. Customer lists, mailing lists, or other compilations Patient List	\$ _____	_____	\$ 0.00
64. Other intangibles, or intellectual property	\$ _____	_____	\$ _____
65. Goodwill	\$ _____	_____	\$ _____
66. Total of Part 10. Add lines 60 through 65. Copy the total to line 89.			\$ 0.00

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

- ☐ No
☒ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☒ No
☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☒ No. Go to Part 12.
☐ Yes. Fill in the information below.

Current value of
debtor's interest

71. Notes receivable

Description (include name of obligor)

_____ — _____ = → \$ _____
Total face amount doubtful or uncollectible amount

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

_____	Tax year _____	\$ _____
_____	Tax year _____	\$ _____
_____	Tax year _____	\$ _____

73. Interests in insurance policies or annuities

_____ \$ _____

74. Causes of action against third parties (whether or not a lawsuit has been filed)

_____ \$ _____

Nature of claim _____

Amount requested \$ _____

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

_____ \$ _____

Nature of claim _____

Amount requested \$ _____

76. Trusts, equitable or future interests in property

_____ \$ _____

77. Other property of any kind not already listed *Examples: Season tickets, country club membership*

_____ \$ _____

_____ \$ _____

78. Total of Part 11.

Add lines 71 through 77. Copy the total to line 90.

\$ _____

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

- ☐ No
☐ Yes

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1.</i>	\$ 32,146.56	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$ 0.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$ 94,121.60	
83. Investments. <i>Copy line 17, Part 4.</i>	\$ 0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$ 0.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$ 0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$ 27,800.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$ 21,650.00	
88. Real property. <i>Copy line 56, Part 9.</i>	→	\$ 5,000,000.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$ 0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$ 0.00	
91. Total. Add lines 80 through 90 for each column. 91a.	\$ 175,718.16	+ 91b. \$ 5,000,000.00
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92. 5,175,718.16		\$ 5,175,718.16

Continuation Sheet for Official Form 206 A/B

3) Checking, savings, money market, or financial brokerage accounts

General description	Type of account	Last 4 digits of account number
United Bank	Checking	8726
Balance: 0.00		
United Bank	Checking	2134
Balance: 2.70		
United Bank	Checking	1528
Balance: 3.00		
United Bank	Checking	6979
Balance: 0.00		
Main Street Bank	Checking	5669
Balance: 147.00		

41) Office equipment, including all computer equipment and communication systems equipment and software

General description	Net book value	Valuation method	Current value
Assorted Office Equipment			7,300.00
Medical Equipment			500.00

50) Other machinery, fixtures, and equipment (excluding farm machinery and equipment)

General description	Net book value	Valuation method	Current value
Tractor with attachments			10,000.00
Weed Trimmer			250.00
Lawn Mowers			900.00
Assorted Tools			10,000.00
Arc Welder			500.00

Debtor name Heart 2 Heart Volunteers Inc d/b/a Serenity Hills Life Center **52**
 United States Bankruptcy Court for the: Northern District of West Virginia
 Case number (if known): 5:25-bk-00087

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim
2.1 Creditor's name Avion Funding LLC Creditor's mailing address 101 Chase Avenue STE 208, Lakewood, NJ 08701 Creditor's email address, if known Date debt was incurred Last 4 digits of account number Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor, 	Describe debtor's property that is subject to a lien Accounts, deposit accounts, and accounts receivable Describe the lien Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 32,613.50 \$ 0.00
2.2 Creditor's name Candy Capital Corp Creditor's mailing address 124 Grove Avenue Suite 309, Cedarhurst, NY 11516 Creditor's email address, if known Date debt was incurred Last 4 digits of account number Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Describe debtor's property that is subject to a lien Proceeds, chattel paper, inventory, equipment, general intangibles, and negotiable instruments Describe the lien Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$27,489.00 \$0.00
3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.	\$ 3,846,647.78	

Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value of collateral.

Column B

Value of collateral that supports this claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2.3 **Creditor's name**
Itria Ventures LLC

Describe debtor's property that is subject to a lien

Present and future accounts, chattel paper, deposit accounts, documents, personal property, general intangibles, instruments, equipment (including assets and fixtures), inventory and proceeds

\$58,100.00

\$0.00

Creditor's mailing address

1 Penn Plz
STE 3101, New York, NY 10119

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Describe the lien

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Have you already specified the relative priority?

☐ No. Specify each creditor, including this creditor, and its relative priority.

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

As of the petition filing date, the claim is:

Check all that apply.

☒ Contingent

☒ Unliquidated

☒ Disputed

☐ Yes. The relative priority of creditors is specified on lines _____

2.4 **Creditor's name**
Legend Advance Funding

Describe debtor's property that is subject to a lien

All of Debtor's Goods, Inventory, Machinery, Equipment, Furniture and Fixtures (as those terms are defined under the UCC) and all of Debtor's Accounts Receivable, including but not limited to Credit Card and Charge Card Receivables, Cash on Hand and in Deposit in Banks, Cash Equivalents, Contracts, Real Property Leases, Notes, Bills, Acceptances, Chooses in Action, Chattel Paper, Instruments, Documents, and all other

\$69,931.19

\$0.00

Creditor's mailing address

800 Brickell Ave
Miami, FL 33131

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

General Intangibles

Describe the lien

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Have you already specified the relative priority?

☐ No. Specify each creditor, including this creditor, and its relative priority.

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

As of the petition filing date, the claim is:

Check all that apply.

☒ Contingent

☒ Unliquidated

☒ Disputed

☐ Yes. The relative priority of creditors is specified on lines _____

Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value of collateral.

Column B

Value of collateral that supports this claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2.5 **Creditor's name**
Partner Community Capital, Inc.

Describe debtor's property that is subject to a lien

All Inventory, Chattel Paper, Accounts, Equipment, General Intangibles, Consumer Goods.

\$230,000.00

\$0.00

Creditor's mailing address

1000 Galliher Drive
Fairmont, WV 26654

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Describe the lien

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Have you already specified the relative priority?

☐ No. Specify each creditor, including this creditor, and its relative priority.

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

As of the petition filing date, the claim is:

Check all that apply.

☒ Contingent

☒ Unliquidated

☒ Disputed

☐ Yes. The relative priority of creditors is specified on lines _____

2.6 **Creditor's name**
Small Business Administration

Describe debtor's property that is subject to a lien

All tangible and intangible personal property, including, but not limited to: (a) inventory, (b) equipment, (c) instruments, including promissory notes (d) chattel paper, including tangible chattel paper and electronic chattel paper, (e) documents, (f) letter of credit rights, (g) accounts, including health-care insurance receivables and credit card receivables, (h) deposit accounts, (i) commercial tort claims, (j) general intangibles and as-extracted collateral.

\$165,519.62

\$0.00

Creditor's mailing address

409 Third St SW
Washington, DC 20416

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Describe the lien

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Have you already specified the relative priority?

☐ No. Specify each creditor, including this creditor, and its relative priority.

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

As of the petition filing date, the claim is:

Check all that apply.

☒ Contingent

☒ Unliquidated

☐ Disputed

☐ Yes. The relative priority of creditors is specified on lines _____

Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value of collateral.

Column B

Value of collateral that supports this claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2.7 Creditor's name The Fundworks LLC	Describe debtor's property that is subject to a lien all accounts, deposit accounts, chattel paper, documents, equipment, general intangibles, instruments, inventory, investment property, letter of credit rights, commercial tort claims and as-extracted collateral; (b) all patents, patent applications, trademarks, trade names, service marks, logos, copyrights, and other sources of business identifiers, and all registrations, recordings and applications	\$118,410.00	\$0.00
Creditor's mailing address 299 S. Main St Suite 1300, PMB 93894, Salt Lake City, UT			
Creditor's email address, if known _____			
Date debt was incurred _____ Last 4 digits of account number _____	Describe the lien _____		
Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
<input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed		

2.8 Creditor's name USDA	Describe debtor's property that is subject to a lien Improvements now on the premises or hereafter placed thereon, including, without limitation, all heating, lighting, refrigeration, plumbing, ventilating, incinerating, water heating, cooling and air-conditioning equipment and apparatus and all appurtenances now and hereafter installed or placed within such improvements. Fixtures, machinery, appliances, and equipment on the premises or hereafter placed or installed. Chattels and articles of personal property owned by the Borrower	\$3,144,584.47	\$0.00
Creditor's mailing address 2118 Ripley Rd. Ripley, WV 25271			
Creditor's email address, if known _____			
Date debt was incurred _____ Last 4 digits of account number _____	Describe the lien _____		
Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
<input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed		

Fill in this information to identify the case:

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Debtor Heart 2 Heart Volunteers Inc d/b/a Serenity Hills Life Center

United States Bankruptcy Court for the: Northern District of West Virginia

Case number 5:25-bk-00087
(If known)

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

- ☒ No. Go to Part 2.
☐ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

2.1 Priority creditor's name and mailing address

As of the petition filing date, the claim is: \$ _____ \$ _____

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Date or dates debt was incurred

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (____)

Is the claim subject to offset?

- ☐ No
☐ Yes

2.2 Priority creditor's name and mailing address

As of the petition filing date, the claim is: \$ _____ \$ _____

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Date or dates debt was incurred

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (____)

Is the claim subject to offset?

- ☐ No
☐ Yes

2.3 Priority creditor's name and mailing address

As of the petition filing date, the claim is: \$ _____ \$ _____

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Date or dates debt was incurred

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (____)

Is the claim subject to offset?

- ☐ No
☐ Yes

Part 2:

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List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	Nonpriority creditor's name and mailing address Advance Communications PO BOX 6650 Wheeling, WV 26003 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ 264.00
3.2	Nonpriority creditor's name and mailing address Advance Lock & Security 109 3rd ST. Bellaire, OH 43906 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ 313.76
3.3	Nonpriority creditor's name and mailing address Alliance Laundry P. O. Box 844226 Dallas, TX 75284 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ 96.31
3.4	Nonpriority creditor's name and mailing address American Electric Power PO Box 24401 Canton, OH 44701 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ 35,317.85
3.5	Nonpriority creditor's name and mailing address Brewer & Company of WV Inc 3601 7th Avenue Charleston, WV 25387 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ 700.00
3.6	Nonpriority creditor's name and mailing address Citynet 3600 University Avenue Morgantown, WV 26505 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ 1,360.82

Part 2:

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Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.⁷ Nonpriority creditor's name and mailing address

Community Bank
875 National Rd
Wheeling, WV 26003

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

\$ 20,038.71

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3.⁸ Nonpriority creditor's name and mailing address

Culligan
809 Boulevard St.
Dover, OH 44622

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

\$ 1,116.50

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3.⁹ Nonpriority creditor's name and mailing address

Dalton Service Company LLC
1230 Mercer Road
Ellwood City, PA 16117

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

\$ 2,515.12

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3.¹⁰ Nonpriority creditor's name and mailing address

Dean's Natural Wellness
489 Charleston St.
Cadiz, OH 43907

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

\$ 11,030.00

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3.¹¹ Nonpriority creditor's name and mailing address

Dish
PO Box 7203
Pasadena, CA 91109

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

\$ 121.99

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

Part 2:

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Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ¹² Nonpriority creditor's name and mailing address

Frontier
PO BOX 740407
Cincinnati, OH 45274

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

\$ 88.79

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ¹³ Nonpriority creditor's name and mailing address

Gompers Lohri & Associates
117 Edgington Lane
Wheeling, WV 26003

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

\$ 7,040.00

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ¹⁴ Nonpriority creditor's name and mailing address

Gordon Food Service
1300 Gezon Parkway SW
Wyoming, MI 49509

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

\$ 28,947.66

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ¹⁵ Nonpriority creditor's name and mailing address

Groupstar
111 Park View Lane
Suite 102
Wheeling, WV 26003

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

\$ 463.75

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ¹⁶ Nonpriority creditor's name and mailing address

Highmark
614 Market Street
P.O. Box 1948
Parkersburg, WV 26101

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

\$ 9,117.51

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

Part 2:

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Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ¹⁷ Nonpriority creditor's name and mailing address

Hughes Office
3114 Belmont St
Bellaire, OH 43906

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

\$ 548.49

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ¹⁸ Nonpriority creditor's name and mailing address

Integrated Software Solutions
PO BOX 822272
South Florida, FL 33082

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

\$ 4,320.60

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ¹⁹ Nonpriority creditor's name and mailing address

Jochum Refuse
1 Ellen St
Wheeling, WV 26003

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

\$ 1,109.69

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ²⁰ Nonpriority creditor's name and mailing address

Klein Consulting Firm
188 Springdale Ave
Wheeling, WV 26003

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

\$ 500.00

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ²¹ Nonpriority creditor's name and mailing address

Lautamus Security
PO Box 2216
Weirton, WV 26062

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

\$ 96.00

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

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Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ²² Nonpriority creditor's name and mailing address

Lowes
PO Box 669807
Dallas, TX 75266

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

\$ 0.00

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ²³ Nonpriority creditor's name and mailing address

Main Street Bank
2001 Main St.
Wheeling, WV 26003

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

\$ 0.00

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ²⁴ Nonpriority creditor's name and mailing address

Medstat
PO Box 1826
Albany, GA 31702

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

\$ 156.68

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ²⁵ Nonpriority creditor's name and mailing address

National Equipment
1 Fourteenth St.
Wheeling, WV 26003

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

\$ 1,185.21

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ²⁶ Nonpriority creditor's name and mailing address

Ohio County Public Service District
PO Box 216
Triadelphia, WV 26059

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

\$ 1,300.81

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

Part 2:

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Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ²⁷ Nonpriority creditor's name and mailing address

Ohio County Sheriff's Department
PO Box 188
Wheeling, WV 26003

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

\$ 1,564.50

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ²⁸ Nonpriority creditor's name and mailing address

On-Site Testing Specialist
5308 Park Ave
Bethel Park, PA 15102

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

\$ 78.48

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ²⁹ Nonpriority creditor's name and mailing address

Orkin
90 W Chestnut St
STE 145UL
Washington, PA 15301

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

\$ 680.97

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ³⁰ Nonpriority creditor's name and mailing address

Relias Learning
PO Box 74008620
Chicago, IL 60674

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

\$ 0.00

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ³¹ Nonpriority creditor's name and mailing address

Schrader Companion Duff & Law
401 Main St.
Wheeling, WV 26003

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

\$ 10,351.19

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

Part 2:

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Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ³² Nonpriority creditor's name and mailing address

Sharon Travis
220 Bethany Pike
Wheeling, WV 26003

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

\$ Unknown

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ³³ Nonpriority creditor's name and mailing address

Stericycle
28883 Network Place
Chicago, IL 60673

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

\$ 2,504.06

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ³⁴ Nonpriority creditor's name and mailing address

Subaru
PO Box 650516
Dallas, TX 75265

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

\$ 693.53

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number 4703

3. ³⁵ Nonpriority creditor's name and mailing address

Subaru
PO Box 650516
Dallas, TX 75265

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

\$ 693.52

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number 1031

3. ³⁶ Nonpriority creditor's name and mailing address

Synrgi Partners, Inc
PO Box 5599
Florence, SC 29502

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

\$ 70,633.47

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

Part 2:

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Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ³⁷ Nonpriority creditor's name and mailing address

The Money Store Funding, Inc
7 Kermit Avenue
Staten Island, NY 10305

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

\$ 26,323.31

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ³⁸ Nonpriority creditor's name and mailing address

United Bank Card Center
PO Box 3364
Charleston, WV 25333

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

\$ 8,413.61

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ³⁹ Nonpriority creditor's name and mailing address

WV BRIM
PO BOX 1373
Charleston, WV 25325

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

\$ 28,539.52

Basis for the claim:

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. _____ Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ _____

Basis for the claim:

Is the claim subject to offset?

- ☐ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. _____ Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ _____

Basis for the claim:

Is the claim subject to offset?

- ☐ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

Part 4:

Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

		Total of claim amounts
5a. Total claims from Part 1	5a.	\$ 0.00
5b. Total claims from Part 2	5b. +	\$ 278,226.41
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c.	\$ 278,226.41

Debtor name Heart 2 Heart Volunteers Inc d/b/a Serenity Hills Life CenterUnited States Bankruptcy Court for the: Northern District of West VirginiaCase number (if known): 5:25-bk-00087Chapter 11☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.☒ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1	State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract	2024 Subaru Ascent Lessee Subaru PO Box 650516 Dallas, TX, 75262
2.2	State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract	2024 Subaru Ascent Lessee Subaru PO Box 650516 Dallas, TX, 75265
2.3	State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract	Annual monitoring of fire alarm system Yahn Electric Company 113 17th Street Wheeling, WV, 26003
2.4	State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract	New hire orientation training- annual subscription Relias 1010 Sync Morrisville, NC, 27560
2.5	State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract	

Debtor name Heart 2 Heart Volunteers Inc d/b/a Serenity Hills Life CenterUnited States Bankruptcy Court for the: Northern District of West VirginiaCase number (If known): 5:25-bk-00087☐ Check if this is an amended filing

Official Form 206H

Schedule H: Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Does the debtor have any codebtors?

☒ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.☐ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, **Schedules D-G**. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name

Mailing address

Name

Check all schedules that apply:

2.1

☐ D
☐ E/F
☐ G

2.2

☐ D
☐ E/F
☐ G

2.3

☐ D
☐ E/F
☐ G

2.4

☐ D
☐ E/F
☐ G

2.5

☐ D
☐ E/F
☐ G

2.6

☐ D
☐ E/F
☐ G

52

Fill in this information to identify the case:

Debtor name Heart 2 Heart Volunteers Inc d/b/a Serenity Hills Life CenterUnited States Bankruptcy Court for the: Northern District of West VirginiaCase number (if known): 5:25-bk-00087☐ Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/22

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

☐ None

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue
Check all that applyGross revenue
(before deductions and exclusions)

From the beginning of the fiscal year to filing date:

From 01/01/2025 to Filing date
MM / DD / YYYY☒ Operating a business
☐ Other\$ 489,887.40

For prior year:

From 01/01/2024 to 12/31/2024
MM / DD / YYYY☐ Operating a business
☐ Other\$ 2,324,988.62

For the year before that:

From 01/01/2023 to 12/31/2023
MM / DD / YYYY☐ Operating a business
☐ Other\$ 1,161,817.00

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None

Description of sources of revenue

Gross revenue from each source
(before deductions and exclusions)

From the beginning of the fiscal year to filing date:

From _____ to Filing date
MM / DD / YYYY

\$ _____

For prior year:

From _____ to _____
MM / DD / YYYY

\$ _____

For the year before that:

From _____ to _____
MM / DD / YYYY

\$ _____

Debtor

Heart 2 Heart Volunteers Inc d/b/a Serenity Hills Life Center
Name

Case number (if known) 5:25-bk-00087

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

	Creditor's name and address	Description of the property	Date	Value of property
5.1.	 Creditor's name		 	\$
5.2.	 Creditor's name		 	\$

6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
 Creditor's name		 	\$

Last 4 digits of account number: XXXX-

Part 3: Legal Actions or Assignments

7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☒ None

	Case title	Nature of case	Court or agency's name and address	Status of case
7.1.	 Case number			<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.2.	 Case title		 Court or agency's name and address	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
	 Case number			

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

Custodian's name and address	Description of the property	Value
 Custodian's name	 	\$
	Case title	Court name and address
	 	Name
	Case number	
	Date of order or assignment	

Part 4: Certain Gifts and Charitable Contributions**9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**

☒ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
9.1. Recipient's name		 	\$
		 	\$
Recipient's relationship to debtor 			
9.2. Recipient's name		 	\$
		 	\$
Recipient's relationship to debtor 			

Part 5: Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**

☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).	Date of loss	Value of property lost
 	 	 	\$

Part 6: Certain Payments or Transfers

11. Payments related to bankruptcy

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☒ None

	Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.1.	<div>Address</div>			\$

Email or website address

Who made the payment, if not debtor?

	Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.2.	<div>Address</div>			\$

Email or website address

Who made the payment, if not debtor?

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.
Do not include transfers already listed on this statement.

☒ None

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
<div>Trustee</div>			\$

Debtor

Heart 2 Heart Volunteers Inc d/b/a Serenity Hills Life Center
Name

Case number (if known) 5:25-bk-00087

13. Transfers not already listed on this statement

List any transfers of money or other property—by sale, trade, or any other means—made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None

Who received transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.1. _____		_____	\$ _____
Address _____			
Relationship to debtor _____			
13.2. _____		_____	\$ _____
Address _____			
Relationship to debtor _____			

Part 7: Previous Locations

14. Previous addresses

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

Address	Dates of occupancy	
	From	To
14.1. _____	_____	_____
14.2. _____	_____	_____

Part 8: Health Care Bankruptcies**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☒ No. Go to Part 9.
- ☐ Yes. Fill in the information below.

Facility name and address

Nature of the business operation, including type of services the debtor provides

If debtor provides meals and housing, number of patients in debtor's care

15.1.

Facility name

Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.

How are records kept?

Check all that apply:

- ☐ Electronically
- ☐ Paper

Facility name and address

Nature of the business operation, including type of services the debtor provides

If debtor provides meals and housing, number of patients in debtor's care

15.2.

Facility name

Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.

How are records kept?

Check all that apply:

- ☐ Electronically
- ☐ Paper

Part 9: Personally Identifiable Information**16. Does the debtor collect and retain personally identifiable information of customers?**

- ☐ No.
- ☒ Yes. State the nature of the information collected and retained. Personal and medical information

Does the debtor have a privacy policy about that information?

- ☐ No
- ☒ Yes

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- ☐ No. Go to Part 10.
- Yes. Does the debtor serve as plan administrator?
- ☒ No. Go to Part 10.
- ☐ Yes. Fill in below:

Name of plan

Employer identification number of the plan

EIN: _____

Has the plan been terminated?

- ☐ No
- ☐ Yes

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units

18. Closed financial accounts

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☐ None

	Financial institution name and address	Last 4 digits of account number	Type of account	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1.	United Bank Name	XXXX-8726	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other	02/04/2025	\$ 0.00
18.2.	United Bank Name	XXXX-6979	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other	01/26/2025	\$ 0.00

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

Depository institution name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Name			<input type="checkbox"/> No <input type="checkbox"/> Yes
Address			

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☒ None

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Name			<input type="checkbox"/> No <input type="checkbox"/> Yes
Address			

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own

21. Property held for another
List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None

Owner's name and address	Location of the property	Description of the property	Value
<div>Name</div>			\$

Part 12: Details About Environmental Information

For the purpose of Part 12, the following definitions apply:

- *Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).
- *Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.
- *Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

☒ No

☐ Yes. Provide details below.

Case title	Court or agency name and address	Nature of the case	Status of case
<div>Case number</div>	<div>Name</div>		<div><input type="checkbox"/> Pending</div> <div><input type="checkbox"/> On appeal</div> <div><input type="checkbox"/> Concluded</div>

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

☒ No

☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
<div>Name</div>	<div>Name</div>		

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name _____	Name _____		

Part 13: Details About the Debtor's Business or Connections to Any Business**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☒ None

	Business name and address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
25.1.	Name _____		EIN: _____ Dates business existed From _____ To _____
25.2.	Business name and address Name _____	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN. EIN: _____ Dates business existed From _____ To _____
25.3.	Business name and address Name _____	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN. EIN: _____ Dates business existed From _____ To _____

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None**Name and address****Dates of service**26a.1. Gompers Lohri & Associates
Name
117 Edgington Lane, Wheeling, WV 26003

From _____

To _____

Name and address**Dates of service**26a.2. _____
Name

From _____

To _____

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☐ None**Name and address****Dates of service**26b.1. Gompers Lohri & Associates
Name
117 Edgington Lane, Wheeling, WV 26003

From _____

To _____

Name and address**Dates of service**26b.2. _____
Name

From _____

To _____

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☒ None**Name and address****If any books of account and records are unavailable, explain why**26c.1. _____
Name

Name and address**If any books of account and records are unavailable, explain why**

26c.2.

Name

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☒ None**Name and address**

26d.1.

Name

Name and address

26d.2.

Name

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No☐ Yes. Give the details about the two most recent inventories.**Name of the person who supervised the taking of the inventory****Date of
inventory****The dollar amount and basis (cost, market, or
other basis) of each inventory**

\$

Name and address of the person who has possession of inventory records

27.1.

Name

Heart 2 Heart Volunteers Inc d/b/a Serenity Hills Life Center

Case number (if known) 5:25-bk-00087

Name _____

[illegible]

Name and address of recipient

30.2

Name

Relationship to debtor

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No
- ☐ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

EIN: _____

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No
- ☐ Yes. Identify below.

Name of the pension fund

Employer Identification number of the pension fund

EIN: _____

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 03/27/2025
MM / DD / YYYY

X

/s/ Sharon Travis

Printed name Sharon Travis

Signature of individual signing on behalf of the debtor

Position or relationship to debtor PresidentAre additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- ☐ No
- ☒ Yes

Continuation Sheet for Official Form 207

3) Certain payments or transfers to creditors within 90 days before filing this case

Brewer & Company of WV Inc., 3601 7th Avenue, Charleston, WV 25387	\$350.00
Citynet LLC, 3600 University Avenue, Morgantown, WV 26505	\$6,433.73
Culligan, 809 Boulevard St., Dover, OH 44622	\$1,189.21
Dalton Service Company LLC, 1230 Mercer Road, Ellwood City, PA 16117	\$3,405.16
Dish, PO Box 7203, Pasadena, CA 91109	\$243.98
Frontier, PO BOX 740407, Cincinnati, OH 45274	\$178.75
Gompers Lohri & Associates, 117 Edgington Lane, Wheeling, WV 26003	\$1,205.00
Hughs Office, 3114 Belmont St, Bellaire, OH 43906	\$1,231.81
Jochum Refuse, 1 Ellen St, Wheeling, WV 26003	\$277.22
Subaru, PO Box 650516, Dallas, TX 75265	\$1,390.05
On-Site Testing Specialist, 5308 Park Ave, Bethel Park, PA 15102	\$78.48
Main Street Bank, 2001 Main St., Wheeling, WV 26003	\$1,019.78
WV Brim, PO BOX 1373, Charleston, WV 25325	\$4,797.33
Gordon Food Service, 1300 Gezon Parkway SW, Grand Rapids, MI 49509	\$51,915.02
Ohio County Public Service District, PO Box 216, Triadelphia, WV 26059	\$5,950.27
Schrader Companion Duff	\$687.50

Continuation Sheet for Official Form 207

& Law, 401 Main St.,
Wheeling, WV 26003

United Bank Card Center, \$28,520.93
PO Box 3364, Charleston,
WV 25333

Avion Funding, 101 Chase \$5,000.00
Avenue STE 208, Lakewood,
NJ 08701

Legend Advance Funding, \$14,850.00
800 Brickell Ave, Miami,
FL 33131

Candy Capital \$4,500.00
Corporation, 124 Grove
Avenue Suite 309,
Cedarhurst, NY 15516

The Money Store, Inc., 7 \$6,953.48
Kermit Avenue, Staten
Island, NY 10305

Itria Ventures LLC, 1 \$5,000.00
Penn Plz STE 3101, New
York, NY 10119

The Fundworks LLC, 299 S. \$2,000.00
Main St Suite 1300 PMB
93894, Salt Lake City,
UT 84111

USDA, 2118 Ripley Rd., \$13,823.00
Ripley, WV 25271

Encova Insurance, One \$567.00
PPG Place # 2700,
Pittsburgh, PA 15222

Go Daddy, 2155 E GoDaddy \$86.58
Way, Tempe, AZ 85284

Lowes, 2100 Georgetown \$767.95
Dr Suite 200, Sewickley,
PA 15143

MedEZ, Integrated \$6,355.90
Software Solutions, Co.,
7450 Griffin Rd STE 150,
Fort Lauderdale, FL 33314

Yahn Electric Company, \$3,335.00
113-17th Street,
Wheeling, WV 26003

Sal Chemical, 3036 Birch \$813.50
Dr, Weirton, WV 26062

Quality Environmental, \$146.54

Continuation Sheet for Official Form 207

13123 Lakeland Rd Ste.
A1, Santa Fe Springs, CA
90670

Small Business \$128.20
Administration, 409
Third St SW, Washington,
DC 20416

Partner Community \$7,530.60
Capital, 1000 Galliher
Drive, Fairmont, WV 26654

17) Pension Contributions

Principal Life

IN RE:

Case No. 5:25-bk-00087

Heart 2 Heart Volunteers Inc d/b/a Serenity Hills Life Center

Chapter 11

LIST OF EQUITY SECURITY HOLDERS

Registered name and last known address of security holder	Shares (Or Percentage)	Security Class (or kind of interest)
---	---------------------------	---

This Debtor is a non-profit, therefore there are no equity security holders

United States Bankruptcy Court

Northern District of West Virginia

In re Heart 2 Heart Volunteers Inc d/b/a Serenity Hills Life Center

Case No. 5:25-bk-00087

Debtor

Chapter 11

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

☐ FLAT FEE

For legal services, I have agreed to accept \$

Prior to the filing of this statement I have received. \$

Balance Due. \$

☒ RETAINER

For legal services, I have agreed to accept a retainer of \$ 5,000.00

The undersigned shall bill against the retainer at an hourly rate of \$ 0.00

[Or attach firm hourly rate schedule.] Debtor(s) have agreed to pay all Court approved fees and expenses exceeding the amount of the retainer.

2. The source of the compensation paid to me was: Heart 2 Heart signed an engagement letter on February 25, 2025. At that time, a retainer was paid in this matter. Fees for preparation of the petition and other first day documents in the amount of \$3,584.00 were paid from that retainer. A retainer balance of \$1,416.00 remains and is being held in Trust.
- ☒ Debtor ☐ Other (specify)
3. The source of compensation to be paid to me is:
- ☒ Debtor ☐ Other (specify)
4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the Agreement, together with a list of the names of the people sharing the compensation is attached.

5. In return of the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
 - Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

03/27/2025

Date

/s/ Kirk Burkley, WV #11767

Signature of Attorney

Bernstein-Burkley, P.C.

Name of law firm

601 Grant Street
9th Floor
Pittsburgh, PA 15219

United States Bankruptcy Court
Northern District of West Virginia

In re: Heart 2 Heart Volunteers Inc d/b/a Serenity
Hills Life Center

Case No. 5:25-bk-00087

Chapter 11

Debtor(s)

Verification of Creditor Matrix

The above-named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Date: 03/27/2025

/s/ Sharon Travis

Signature of Individual signing on behalf of debtor

President

Position or relationship to debtor

Advance Communications
PO BOX 6650
Wheeling, WV 26003

Advance Lock & Security
109 3rd ST.
Bellaire, OH 43906

Alliance Laundry
P. O. Box 844226
Dallas, TX 75284

American Electric Power
PO Box 24401
Canton, OH 44701

Avion Funding LLC
101 Chase Avenue
STE 208
Lakewood, NJ 08701

Brewer & Company of WV Inc
3601 7th Avenue
Charleston, WV 25387

Candy Capital Corp
124 Grove Avenue
Suite 309
Cedarhurst, NY 11516

Citynet
3600 University Avenue
Morgantown, WV 26505

Community Bank
875 National Rd
Wheeling, WV 26003

Culligan
809 Boulevard St.
Dover, OH 44622

Dalton Service Company LLC
1230 Mercer Road
Ellwood City, PA 16117

Dean's Natural Wellness
489 Charleston St.
Cadiz, OH 43907

Dish
PO Box 7203
Pasadena, CA 91109

Frontier
PO BOX 740407
Cincinnati, OH 45274

Gompers Lohri & Associates
117 Edgington Lane
Wheeling, WV 26003

Gordon Food Service
1300 Gezon Parkway SW
Wyoming, MI 49509

Groupstar
111 Park View Lane
Suite 102
Wheeling, WV 26003

Highmark
614 Market Street
P.O. Box 1948
Parkersburg, WV 26101

Hughes Office
3114 Belmont St
Bellaire, OH 43906

Integrated Software Solutions
PO BOX 822272
South Florida, FL 33082

Itria Ventures LLC
1 Penn Plz
STE 3101
New York, NY 10119

Jochum Refuse
1 Ellen St
Wheeling, WV 26003

Klein Consulting Firm
188 Springdale Ave
Wheeling, WV 26003

Lauttamus Security
PO Box 2216
Weirton, WV 26062

Legend Advance Funding
800 Brickell Ave
Miami, FL 33131

Lowes
PO Box 669807
Dallas, TX 75266

Main Street Bank
2001 Main St.
Wheeling, WV 26003

Medstat
PO Box 1826
Albany, GA 31702

National Equipment
1 Fourteenth St.
Wheeling, WV 26003

Ohio County Public Service District
PO Box 216
Triadelphia, WV 26059

Ohio County Sheriff's Department
PO Box 188
Wheeling, WV 26003

On-Site Testing Specialist
5308 Park Ave
Bethel Park, PA 15102

Orkin
90 W Chestnut St
STE 145UL
Washington, PA 15301

Partner Community Capital, Inc.
1000 Galliher Drive
Fairmont, WV 26654

Relias
1010 Sync
Morrisville, NC 27560

Relias Learning
PO Box 74008620
Chicago, IL 60674

Schrader Companion Duff & Law
401 Main St.
Wheeling, WV 26003

Sharon Travis
220 Bethany Pike
Wheeling, WV 26003

Small Business Administration
409 Third St SW
Washington, DC 20416

Stericycle
28883 Network Place
Chicago, IL 60673

Subaru
PO Box 650516
Dallas, TX 75265

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PO Box 650516
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Synrgi Partners, Inc
PO Box 5599
Florence, SC 29502

The Fundworks LLC
299 S. Main St
Suite 1300, PMB 93894
Salt Lake City, UT 84111

The Money Store Funding, Inc
7 Kermit Avenue
Staten Island, NY 10305

United Bank Card Center
PO Box 3364
Charleston, WV 25333

USDA
2118 Ripley Rd.
Ripley, WV 25271

WV BRIM
PO BOX 1373
Charleston, WV 25325

Yahn Electric Company
113 17th Street
Wheeling, WV 26003